



County of San Diego

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July 19, 1999

The Honorable Wayne L. Peterson
Presiding Judge
San Diego Superior Court, Dept. 1
220 W. Broadway
San Diego, CA 92101

Dear Judge Peterson:

Attached, please find the Board of Supervisors' response to the San Diego County Grand Jury 1998-1999 Interim Report: *Holes in the Health Care Safety Net* for your transmittal to the Grand Jury. I have also provided the minute order indicating how each Board member voted on this item.

If you have any questions concerning this matter, please don't hesitate to contact me at 531-5250.

Best regards,

WALTER F. EKARD
Chief Administrative Officer
County of San Diego

WE/pf
Attachment

**Response to the 1998-1999 Grand Jury Interim Report:
"Holes in the Health Care Safety Net"**

Recommendation 99-68: The Chief Administrative Officer should recommend to the Board of Supervisors that it restore General Fund allocations to the indigent health care to at least the 1990-91 levels and raise the CMS rates of reimbursement to local providers to reimburse at levels close to the real cost of providing health care. For hospitals this increase should be at least to the Medi-Cal rate for inpatient care.

Response: Disagree in part. The County CMS program already reimburses community clinics, physicians and hospital outpatient services at or above Medi-Cal reimbursement levels. The County recognizes the need to raise reimbursement for hospital inpatient care to Medi-Cal levels and has increased hospital payment rates in the upcoming fiscal year. Further rate increases are planned as resources are made available. The County is currently seeking greater funding for health care through various means, including: (a) legal proceedings to obtain payment from the State for indigent health care which the State failed to provide to the County despite requirements in the State Constitution, and (b) efforts to secure equity health funding from the State through the County's Improving Access to Healthcare Project.

Recommendation 99-69: The San Diego County Board of Supervisors should direct all future growth in Health Realignment revenues to community-based health programs providing health care services and to health care coverage programs for the uninsured.

Response: Disagree in part. The County will continue to spend Health Realignment funds on those programs and purposes which the Legislature intended and the law permits. Realignment funds were explicitly intended by the Legislature to be utilized on a wide array of health programs including indigent care, public and environmental health, and other health programs. The Board of Supervisors was charged with the responsibility to allocate Health Realignment dollars among these various programs. This includes crucial services to uninsured persons and to protect the public health of the San Diego region. Reducing or eliminating some public health programs, such as childhood immunizations or medical care for jail inmates and juvenile detainees when they are ill, would leave various parts of the San Diego region more vulnerable to disease than they are at present.

Recommendation 99-70: The San Diego County Board of Supervisors should comply with their previous vote to dedicate all Tobacco Settlement funding to health care services and programs.

Response: Agree. The San Diego County Board of Supervisors was the first local government anywhere in California to set in motion plans to focus the use of anticipated Tobacco Settlement revenues on improving access to health care. A broad-based citizen input and planning process is underway to advise the Board of Supervisors on how best to use these new funds. The Board of Supervisors will carefully consider this advice as it annually determines how to spend Tobacco Settlement funds.

Recommendation 99-71: The Director of the Health & Human Services Agency should evaluate the CMS program for expansion to include purchasing of health insurance coverage for certain

classes of CMS patients that have a high need for primary care, such as low-income women between 45 and 65 years of age.

Response: Agree. The Director of the Health and Human Services Agency is undertaking a study, through the Improving Access to Healthcare Project and with the funding assistance of the Healthcare Association of San Diego and Imperial Counties, of feasible private and public policies to improve access to healthcare for the uninsured. Options to be considered include various methods to build upon the existing CMS program and improving access to care for individuals with chronic health problems.

In recognition of the growing problem of 600,000+ persons without health insurance in San Diego County, the Board of Supervisors during the past five years has been engaged in a partnership planning process with health care consumers and providers, with employers, with health researchers and advocates, and with the broader community. Step by step, from the Indigent Care Commission, through the Regional Healthcare Advisory Council, on into the Improving Access to Healthcare Project Management Committee, the County has been working to build a broad-based understanding of the region's health care problems and build consensus for voluntary public-private support and solutions. As this process unfolds, plans call for a sharp focus on specific approaches to redesigning the County Medical Services Program and other publicly funded health programs in order to improve health care access. Close attention will be given not only to the specific insurance purchasing plans that the Grand Jury advocates, but also to other techniques to obtain better health care access within available private and public resources.

Recommendation 99-72: The Director of the Health & Human Services Agency should assure that all welfare applicants and welfare recipients leaving the welfare rolls are fully informed about their Medi-Cal eligibility. All former welfare recipients who have left the welfare rolls since July 1996 should be contacted, advised of their potential Medi-Cal eligibility, and assisted with re-applying.

Response: Agree. The County has already implemented a plan to inform former and current CalWORKs recipients of their rights and potential eligibility for Medi-Cal. This effort has been carefully coordinated within the Health and Human Services Agency and among other service providers and community agencies.

Recommendation 99-73: The Director of the Health and Human Services Agency should take steps to prevent welfare-related Medi-Cal enrollees from losing Medi-Cal health coverage.

Response: Agree. Policies and procedures are already in place to inform welfare recipients of their continued eligibility for Medi-Cal and Share-of-Cost Medi-Cal.

Recommendation 99-74: The Director of the Health and Human Services Agency should aggressively expand outreach activities for the Medi-Cal programs and Healthy Families. Community-based outreach should include door-to-door outreach and full-time out-stationing of eligibility workers in schools and at community health centers.

Response: Agree in part. The San Diego County Board of Supervisors has recognized the importance of assuring enrollment of children and their parents who are eligible for publicly financed health care into the State's Medi-Cal and Healthy Families programs. The County was the first in California to obtain State funding for community-based outreach to families in communities with numbers of eligible but not enrolled children. This latest County initiative is greatly expanding outreach for Medi-Cal and Healthy Family medical care through the effective use of Community Health Workers to reach into their own neighborhoods. Eligibility Workers are already outstationed in several community health clinics where the need for their services exists. However, it would not be practical to outstation full-time or part-time staff at every community health center or school as proposed by the Grand Jury.

Recommendation 99-75: The County Board of Supervisors should support state legislation to extend the Healthy Families insurance program to more children. This could be done by including provisions in the legislation that automatically enroll, or make eligible, children who are also eligible for food stamps, school lunch, CalWORKS or other state and county programs, into the Healthy Families program.

Response: Agree in part. The Board of Supervisors has already demonstrated its commitment to providing the greatest access to health care for children and is supportive of local, State and federal efforts to improve and streamline systems designed to accomplish this end. Healthy Families program analysis and review are underway at the State level to determine what opportunities exist to expand utilization. County representatives participate on these committees. Once final legislation is drafted, the Board of Supervisors will review and decide what impact, if any, there is to the County and whether or not to support. Children in CalWORKS families are automatically eligible for the Medi-Cal program, which provides health coverage at no cost to the family.

Recommendation 99-76: The County Board of Supervisors should support legislation that extends eligibility for the Healthy Families program to 300 percent of the Federal Poverty Level.

Response: Agree in part. The County already actively supports legislation, currently awaiting the Governor's approval after having been passed by the Legislature, to increase Healthy Families program eligibility from 200 percent to 250 percent of the federal poverty level. The advocacy for this legislation reflects the positions taken over the past several years in various actions by the Board of Supervisors to seek expansion of access to health care for children and other vulnerable County residents. Since the County is already supporting legislation which may be enacted, no further action is recommended.

Recommendation 99-77: The County Board of Supervisors should reduce fragmentation and the stigma of publicly funded health coverage programs by seeking to integrate CMS, Medi-Cal, Healthy San Diego, and Healthy Families coverage programs with Tobacco Settlement funding and other revenues into a separate identified County organized health coverage consortium or collaborative.

Response: Disagree in part. The County's Improving Access to Healthcare project will identify and evaluate all methods for possible improvement in the provision of health services to

uninsured persons during the 1999-2000 fiscal year. This will include approaches to eliminate barriers to access due to fragmentation and stigma. The reports of that public-private project will be widely disseminated throughout the region for public review and input prior to submission to the Board of Supervisors. Unilateral action by the Board of Supervisors, as recommended by the Grand Jury, is not a desirable or feasible approach to such a large scale redesign of the three State and one County health programs identified by the Grand Jury.

Recommendation 99-78: The County Board of Supervisors should guarantee a minimum level of funding to the UCSD Medical Center for indigent health care based on some form of fixed maintenance-of-effort in its operating agreement with the UCSD Medical Center.

Response: Disagree in part. The Board of Supervisors already has an active Operating Agreement with UCSD-Medical Center that establishes reimbursement levels based on a mutually agreed upon formula for emergency services provided to uninsured U.S. citizens and legal aliens who are not eligible for other publicly funded programs. UCSD-Medical Center also receives additional reimbursement from the County for health care services provided to County Medical Services' patients. Guaranteeing a minimum payment amount, regardless of whether or not services are provided, would not be appropriate. The Health and Human Services Agency Director has begun discussions with UCSD regarding their continuing viability as a key safety net provider.

Recommendation 99-79: The Board of Supervisors should give members of the public, their representatives and consumers a stronger voice in the Improving Access to Healthcare Project by changing the composition of the Project Management Committee membership to include at least one-third consumer representation, one-third health industry representation, and one-third government representation.

Response: Disagree. The Project Management Committee of the Improving Access to Healthcare Project is already well-balanced, with over one-third of those serving representing the interests of consumers and purchasers of health care. Leadership from private clinics, hospitals, managed care organizations, and physicians is also present. In addition, the Improving Access to Healthcare Project consultant has been tasked with soliciting extensive community input in developing options and making recommendations to improve access.

Recommendation 99-80: The County Board of Supervisors should support legislation that extends or phases in Healthy Families and Medi-Cal to uninsured adults, beginning with the parents of eligible children and then to others who could pay the premiums on their own, on a sliding scale, or through incentives provided to employers.

Response: Disagree in part. This is a very broad recommendation with potential major impacts, and warrants careful review. The Health and Human Services Agency will conduct a thorough cost/benefit analysis. Agency staff will solicit input from the County Health Services Advisory Board to assist in the review process.

Recommendation 99-81: The Board of Supervisors should adopt an ordinance requiring all contractors to the County of San Diego include health coverage benefits for their employees.

Response: Disagree. This proposal would interject the County government into the decision making of independent, private firms located in many areas of the State and nation, at a substantial and unspecified cost to the taxpayers.

COUNTY OF SAN DIEGO
BOARD OF SUPERVISORS
TUESDAY, JULY 13, 1999

MINUTE ORDER NO. 4

**SUBJECT: RESPONSE TO GRAND JURY 1998-99 INTERIM REPORT ON
HOLES IN THE HEALTH CARE SAFETY NET**
(Supv. Dist: All)

OVERVIEW:

On June 15, 1999 (16), the Board received the Grand Jury Interim Report entitled "Holes in the Health Care Safety Net," and directed the Chief Administrative Officer to draft a response for the Board's consideration no later than July 13, 1999.

FISCAL IMPACT:

There is no fiscal impact with this action.

RECOMMENDATION:

CHIEF ADMINISTRATIVE OFFICER:

Authorize the Chief Administrative Officer to transmit the "Response to the 1998-99 Grand Jury Interim Report: Holes in the Health Care Safety Net" to the Grand Jury via the Superior Court Presiding Judge.

ACTION:

ON MOTION of Supervisor Horn, seconded by Supervisor Cox, the Board of Supervisors took action as recommended, on Consent.

AYES: Cox, Jacob, Slater, Roberts, Horn

State of California)
County of San Diego)^{ss}

I hereby certify that the foregoing is a full, true and correct copy of the Original entered in the Minutes of the Board of Supervisors.

THOMAS J. PASTUSZKA
Clerk of the Board of Supervisors

By: Jan Bryson
Jan Bryson, Deputy

